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FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

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2015 JUL 20 PM 12: 33

Office Use Only

NAME OF     COMMITTEE (in full)	TYPE OR PRINT V		imple: If typing, to the lines.	type l	2FE4M5		
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	<del></del>			<del>                                     </del>			
ADDRESS (number and street)	7 <sub>1</sub> 3 <sub>1</sub> 9 <sub>1</sub> W <sub>1</sub> 5	$i_l l_l s_l o_l n_l$	Ауелч	ę <u> </u>	<del>                                     </del>		
Check if different than previously reported. (ACC)	Mulsikield				I 4	9 4 4 1	- 3 10 A P
2. FEC IDENTIFICATION I	NUMBER ▼	CITY 🛦		STA	TE A	ZIP CO	DE 🛦
C 0 0 5 2 6 2	4 4	3. IS THIS REPORT	NEV (N)	OR	AME (A)	ENDED	
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report	(Q2) (C) 12-Day PRE-E Report		Jun	» <b>D</b>	المستع ومستع	2G)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE):
January 31 Year-End Report  July 31 Mid-Year Report (Non-elect Year Only) (MY)  Termination Report (TER)	tion (d) 30-Day	Election on Election for the:	General (30G)		Runoff (30	R) In the State of	Special (30S)
5. Covering Period 0	1 0 1	2_0_1_5	through	0 6	3 0	2 0 1 5	
I certify that I have examined			wledge and belie	ef it is true,	correct and	•	
Type or Print Name of Treasu Signature of Treasurer	rer Julia Deni	ah De	umb	Date	M M M 0 7	0 9	y y y y y 2 2 0 1 5
NOTE: Submission of false, erro	· · · · · · · · · · · · · · · · · · ·	information may s	ubject the person	signing this I	Report to the	penalties of 52	U.S.C. § 30109.
Office Use Only		N# 20 1.				FEC FOF Rev. 12/2	RM 3X

**SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS Page 2 FEC Form 3X (Rev. 02/2003) Write or Type Committee Name In Our Mothers Name Report Covering the Period: From: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period..... (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) ..... 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) ..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)					
Write or Type Committee Name					
In Our Mothers Name					
Report Covering the Period: From:					
I. Receipts					
11. Contributions (other than loans) Fro (a) Individuals/Persons Other	mc				

Than Political Committees

(iii) TOTAL (add

(c) Other Political Committees

12. Transfers From Affiliated/Other

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)

16. Refunds of Contributions Made to Federal Candidates and Other

(a) Non-Federal Account

19. Total Receipts (add Lines 11(d),

(subtract Line 18(c) from Line 19) ....... ▶

20. Total Federal Receipts

17. Other Federal Receipts

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry

Page 3

To: **COLUMN A COLUMN B Total This Period** Calendar Year-to-Date (i) Itemized (use Schedule A)...... (ii) Unitemized ..... Lines 11(a)(i) and (ii).....▶ 0 (b) Political Party Committees ..... (such as PACs)..... Totals to Line 33, page 5) .....▶ Party Committees..... 13. All Loans Received ..... 14. Loan Repayments Received..... (Carry Totals to Line 37, page 5)..... Political Committees..... (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (from Schedule H3) ..... 0 (b) Levin Funds (from Schedule H5) ....... (c) Total Transfers (add 18(a) and 18(b)).. 12, 13, 14, 15, 16, 17, and 18(c))....... ▶

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tills I Citou	Calendal Tear-to-Date
	Activity (from Schedule H4)		
	(i) Federal Share	0	0
	(ii) Non-Federal Share		
	(b) Other Federal Operating  Expenditures	0	0
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))▶	0	0
22.	Transfers to Affiliated/Other Party		
	Committees	1 ()	
23.	Contributions to Federal Candidates/Committees		
	and Other Political Committees	0	0
24.	Independent Expenditures		
25.	(use Schedule E) Coordinated Party Expenditures		<u> </u>
	(52 U.S.C. § 30116(d)) (use Schedule F)	0	0
	(use scriedule 1)		
26.	Loan Repayments Made	0	
27.	Loans Made	0	0
20.	(a) Individuals/Persons Other		
	Than Political Committees	<u> </u>	<u> </u>
	(b) Political Party Committees	0	0
	(c) Other Political Committees		A 412 A 412 A 422 A
	(such as PACs)	0	
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0	0
	OH 504 14		
29.	Other Disbursements	0	0
30.	Federal Election Activity (52 U.S.C. § 30101(20	ווס	
	(a) Allocated Federal Election Activity	•	
	(from Schedule H6)		
	(i) Federal Share	0	0
	(ii) "Levin" Share		0
	(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
	(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶		
	•		
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0	0
20	Total Fodoral Diaburgareasts	/	
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)		

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

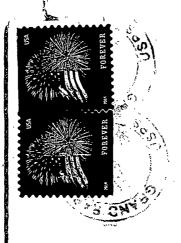
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111	. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	0	0
34.	Total Contribution Refunds (from Line 28(d))	0	0
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	0	0
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0	0
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0	0

### S IT

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1 OF 1 (check only one)  11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  In Our Mothers Name			son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  A.  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary Other (specify)   General	State  C Occupation Aggregate	Zip Code  Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  B.  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify) ▼	Occupation	Year-to-Date ▼	Date of Receipt  M - M / O D / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y
Full Name (Last, First, Middle Initial)  C.  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify)   Other (specify)	State  C Occupation  Aggregate	Zip Code  Zip Code  Year-to-Date ▼	Date of Receipt  M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line numb		·	0

## SCHEDULE B (FEC Form 3X)

SCHEDOLL D (I LO I OIIII 3X)	Lico separato cabadulata	FOR LINE N	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b	22 23 24 25 26
		27	28a 28b 28c 29 30b
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)		_ <del></del>	
In Our Mothers Name			
Full Name (Last, First, Middle Initial)	<del></del>	<del></del>	
1.			Date of Disbursement
			MUM, COLO, VALANTA
Mailing Address			
City State Zip Code			
Purpose of Disbursement	-		
			Amount of Each Disbursement this Period
Candidate Name	L	Category/	
Office Sought:   House   Disbursen	pent For:	Туре	
	nent For: Primary General		
	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial)			
3.			Date of Disbursement
Mailing Addr			M · M · / D / CD / Y WY WY
Mailing Address		[	be soil bear bear
City	State Zip Code		
Purpose of Disbursement		********	
			Amount of Each Disbursement this Period
Candidate Name Category/			
Office Sought: House Disbursen	nent For:	Туре	
	Primary General	ļ	
	Other (specify) ▼		
State: District:	· 		
Full Name (Last, First, Middle Initial)			
C.		1	Date of Disbursement
Mailing Address			WAW 1 CORD 1 LASARASA
Mailing Address			
City	State Zip Code		
Purpose of Disbursement	l.		
Candidate Name		الصيح	Amount of Each Disbursement this Period
		Category/ Type	
Office Sought: House Disburser	nent For:	*11.2	
	Primary General		
President	Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			٨
raye (optional)			
TOTAL This Period (last page this line number only)	·	······	0
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	Next Business Day Delivery		
Received from House Records & Registration	Date of Receipt on Office		
Received from Senate Public Records Office	Date of Receipt		
Received from Electronic Filing Office	Date of Receipt		
Other (Specify):	Date of Receipt or Postmarked		
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PREPARER (3/2015)

7-20-15 DATE PREPARED